

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PA	70385	9/20
O.I.P.E. CLASSIFIER		19	10/18/00
FORMALITY REVIEW	TL	902	
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)..... Canceled A Appeal
+ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	2.22.00
2	✓	✓	10.10.00
3	✓	✓	5.10.03
4	✓	✓	5.10.03
5	✓	✓	5.10.03
6	✓	✓	5.10.03
7	✓	✓	5.10.03
8	✓	✓	5.10.03
9	✓	✓	5.10.03
10	✓	✓	5.10.03
11	✓	✓	5.10.03
12	✓	✓	5.10.03
13	✓	✓	5.10.03
14	✓	✓	5.10.03
15	✓	✓	5.10.03
16	✓	✓	5.10.03
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25	✓	✓	5.10.03
26	✓	✓	5.10.03
27	✓	✓	5.10.03
28	✓	✓	5.10.03
29	✓	✓	5.10.03
30	✓	✓	5.10.03
31	✓	✓	5.10.03
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41	✓	✓	5.10.03
42	✓	✓	5.10.03
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47	✓	✓	5.10.03
48	✓	✓	5.10.03
49	✓	✓	5.10.03
50	✓	✓	5.10.03

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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